

2025 Annual Provider Newsletter

Information and updates for
Texas Children's Health Plan Providers



Texas Children's Health Plan (TCHP) is proud to partner with our providers in delivering exceptional care to our members. As part of our ongoing commitment to support your practice, the 2025 provider newsletter brings you timely updates, key reminders, and valuable resources designed to help you stay informed.

In this issue, you'll find:

- Updates on **quality improvement initiatives** and performance measures.
- Information from TCHP's Pharmacy Department on the **Texas Vendor Drug Program (VDP)** and **Preferred Drug List (PDL)**.
- Important reminders about **Texas Children's® Link**, our provider portal.
- Details on upcoming **training sessions and webinars** to support your team.
- Information on **Provider Enrollment and Management System (PEMS)**, including tips for navigating enrollment.

We appreciate your dedication to improving the health and well-being of our community. If there are topics you'd like us to cover in future communications, we welcome your feedback.

Thank you for your continued partnership.

Texas Children's Health Plan Provider Relations

Phone: 832-828-1004 | **Fax:** 832-825-8750 | **Toll-Free:** 1-800-731-8527

Email: providerrelations@texaschildrens.org

Contact us Monday to Friday, 8:00 a.m.–5:00 p.m. for requests for information on the following:

- Texas Children's Health Plan's Provider Portal, Texas Children's® Link.
- Provider TouCHPoint information
- Provider education such as New Provider Orientation or Continued Medical Education (CME).
- Texas Children's Health Plan's procedural information.

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Important Update on Texas Children's Health Plan (TCHP)'s Contract Status with Texas Health and Human Services Commission (HHSC)

As you may have heard, HHSC conducted a Medicaid STAR & CHIP Managed Care procurement. In March 2024, HHSC posted their Notice of Intent to Award (NOIA) for the Medicaid STAR & CHIP Managed Care Services contract and Texas Children's Health Plan (TCHP) was not on the list of awardees, despite over a 25-year partnership with the State to serve Texas' Medicaid population. We were deeply disappointed by this decision and since March 2024 TCHP has been pursuing all available administrative, legislative and legal remedies. If this decision stands, it would result in nearly half a million individuals, pregnant women and children, in the Harris and Jefferson service delivery areas alone to be forced to change their providers, causing an unnecessary disruption of care.

In June 2024, TCHP, along with several other current Texas Medicaid managed care plans, filed a lawsuit against HHSC's Executive Commissioner to prevent HHSC from signing contracts that were improperly awarded as a result of a legally flawed Medicaid STAR and CHIP procurement. On October 4, 2024, the Travis County District Judge **granted a temporary injunction**, ruling that HHSC is not allowed to sign and execute contracts with the health plans listed on the NOIA until the final judgment on the merits and legality of the procurement has been determined. This case is currently working through the legal process.

We are asking you to help ensure that our members, your patients, and their families have accurate information about their coverage. As a reminder, there is no loss of coverage at this time and TCHP still holds a Medicaid STAR and CHIP contract. Our STAR and CHIP members will not see any impact and will continue to receive the same benefits and services they always have. Additionally, we continue to be a STAR Kids plan.

As a non-profit health plan founded nearly 30 years ago specifically to serve the needs of Texas' most vulnerable residents, serving Medicaid and CHIP members, we will continue to fight this potential outcome for our members as one of the highest rated quality plans in our markets.

TCHP looks forward to serving the Texas Medicaid and CHIP community for many years to come. We thank you for your support and partnership. If you have questions, or would like information on additional ways you can help, please reach out to your Provider Relations Liaison.



Important Topics For You



Texas Children's Health Plan invites you to join our quarterly Provider Advisory Group (PAG) meetings, visit <https://www.texaschildrenshealthplan.org/providers/provider-events> to register today. The PAG meeting dates in 2026 are March 17, June 16, September 22, and December 8.



Stay informed with the latest provider communications and updates – visit our Provider Alerts landing page, <http://www.texaschildrenshealthplan.org/provideralerts>.



Non-Emergency Medical Transportation (NEMT) update: Texas Children's Health Plan is transitioning to a new Member medical transportation provider. Medical Transportation Management (MTM) will transition to Safe Ride Health effective December 15, 2025. For key dates and contact information, visit <https://www.texaschildrenshealthplan.org/news/provider-alert/new-member-transportation-vendor-coming-soon>.



We have an array of training available for providers such as PEMS Information, Utilization Management Overview training and CME opportunities. Please visit <https://www.texaschildrenshealthplan.org/providers/provider-events>.



Coming in April 2026: Texas Children's Health Plan will be transitioning to Zelis as our new payment vendor. We're excited about the improvements this change will bring. More information will be shared soon on our website.



We encourage providers to visit our Electronic Visit Verification (EVV) webpage for the latest information and updates for program providers, Financial Management Services Agency (FMSAs) providers and Consumer Directed Services (CDS) employers. To learn more, visit <https://www.texaschildrenshealthplan.org/providers/provider-resources/evv>.



Texas Children's Health Plan is now using MyChart to manage member rewards. It's now easier than ever for members to request rewards through their TCHP MyChart platform. Members new to MyChart are required to create an account and then activate their TCHP information. For more information including a helpful how to video, visit <https://www.texaschildrenshealthplan.org/mychart>.

Clinical Practice Guidelines

Texas Children's Health Plan, with the guidance of its Clinical & Administrative Advisory Committees, develops or adopts evidence-based Clinical Practice Guidelines. These practice guidelines: (1) Are based on valid and reliable clinical evidence or a consensus of health care professionals in the particular field; and (2) Consider the needs of Texas Children's Health Plan enrollees. Texas Children's Health Plan has Clinical Practice Guidelines in place including, but not limited to the following:

Allergy Guidelines

Asthma Guidelines

Behavioral Health Guidelines

- ADD/ADHD
- Addiction Medicine
- Anxiety
- Behavioral Health Level of Care
- Depression

State Guidelines

– Screening and Drug Formulary

Diabetes Guidelines

Neuropsychology Guidelines

Otitis Guidelines

Obesity Guidelines

Syphilis Guidelines

Pharyngitis Guidelines

Prenatal and Postpartum Care Guidelines

- Syphilis testing and management in pregnancy
- STI Screening
- Reducing the Primary Cesarean Section Rate
- Prenatal Care
- Postpartum Care
- Maternal Substance Use/Abuse Screening and Management
- Postpartum Depression Screening and Management
- Maternal Morbidity and Mortality Prevention

Preventative Care Guidelines

Tonsillectomy Guidelines

The Clinical Practice Guidelines are updated at least once every two years. These guidelines are adapted from national guidelines for practice. All are reviewed, modified if appropriate and approved by participating providers and the TCHP medical and behavioral health advisory committees, which are composed of primary care providers, behavioral health providers and a variety of specialists. Clinical Practice Guidelines can be found on our website, <https://www.texaschildrenshealthplan.org/providers/provider-resources/practice-guidelines>.

We will fax or mail the Clinical Practice Guidelines to providers without internet access upon request. Please contact Provider Relations at 832-828-1004 or toll free at 800-731-8527.

Availability of Criteria to Practitioners

Texas Children's Health Plan uses Utilization Management (UM) Guidelines, which are written criteria based on clinical evidence in addition to a review of individual circumstances and local health system structure when determining medical appropriateness of health care services that require prior authorization. The goal of our UM Guidelines is to encourage the highest quality care from the right provider in the right setting.

Providers may access the guidelines and medical necessity criteria in any of the following methods:

- Texas Children's® Link Provider Portal: <https://epiccarelink.texaschildrens.org/>
- Website: <https://www.texaschildrenshealthplan.org/for-providers/prior-authorization-information>
- Contact Texas Children's Health Plan Provider Relations Department at 832-828-1004 or Toll-Free at 1-800-731-8527.





Preventive Health Service Responsibilities

The quality of care primary care providers deliver to members has a direct impact on positive member health outcomes. The receipt of timely and appropriate preventive care in accordance with state and nationally recognized standards of health care quality is key to the health of the populations we serve. Primary care providers have the responsibility to provide preventive health services in accordance with Texas Medicaid STAR/CHIP program requirements, HEDIS (Healthcare Effectiveness Data and Information Set) quality of care metrics and related medical policies. Primary care providers should deliver quality preventive health services including, but not limited to, the following:

- Timely infant, pediatric and adolescent wellness visits, screenings, and immunizations in accordance with:
 - Texas Health Steps periodicity schedule for STAR
 - American Academy of Pediatrics (AAP) Guidelines for CHIP

- Annual well checkups, routine immunizations and screenings for all adult members age 21 and older.
- Immunizations, TB screenings, and other measures for the prevention and detection of disease, including instructions in personal health care practices and information on the appropriate use of medical resources.
- Education of members about their right to self-refer to any in-network OB/GYN provider for OB/GYN health-related care.
- Referral to case management services as appropriate to help members navigate barriers to receiving needed preventive health services (e.g. transportation or other nonmedical determinants of health).
- Referral to a dentist for routine preventative dental services.

Source: Texas Health Steps | Texas Health and Human Services

Supporting You with Quality Improvement Resources

At Texas Children's Health Plan, we're dedicated to ensuring you have the tools you need to succeed. Our Quality Team offers a range of valuable resources to support your practice, improve patient outcomes, and make navigating quality initiatives easier. We invite you to explore the resources outlined below.

Partner with Our Clinical Practice Consultant

Our Clinical Practice Consultant (CPC) is here to support you with improving quality of care to achieve your performance goals. Working alongside Quality Improvement Specialists and Nurse Auditors, the CPC provides guidance on available incentives, navigating alternative payment models, and aligning your practice

with the latest evidence-based research and clinical guidelines. They are here to help you navigate quality programs, close gaps in care, and exceed performance benchmarks, such as HEDIS measures and appointment availability.

By partnering with our CPC, you'll have access to the latest metrics, information on emphasizing wellness and prevention, and strategies that can boost both provider and member satisfaction. Contact your Provider Relations Liaison or Account Lead to schedule a meeting with our CPC today.

Explore recent presentations shared by TCHP's Clinical Practice Consultant:

- **Setting Up for Success in 2025:** Quality Improvement Terminology, Annual HEDIS Medical Record Review, Provider Resources, and How to Contact the Clinical Practice Consultant and Other TCHP Teams. To watch the presentation from the Provider Advisory Group meeting, visit <https://www.brainshark.com/tchpinc/vu?pi=zJEzIPdWxzilLaz0>
- **Summer 2025 Best Practice Recommendations:** Wellness, Immunizations, and Influenza Season Preparation. To watch the presentation, visit <https://www.brainshark.com/tchpinc/vu?pi=zHezbRUO7zilLaz0>
- **2025-2026 Influenza Season:** Protecting Your Patients with Effective Prevention, Immunizations, and Trust-Building. To watch the presentation, visit <https://www.brainshark.com/tchpinc/vu?pi=zILzDRogMzilLaz0>

After-hours care resources for TCHP members:

- **Texas Children's Anywhere Care:** Whether day or night, TCHP members can have an online visit with a health care provider to treat a variety of routine medical conditions. Additional information on Anywhere Care can be found here: <https://www.texaschildrenshealthplan.org/anywherecare>.
- **Virtual Care Options:** Additional virtual care options are available to TCHP members. Find out more information at <https://www.texaschildrenshealthplan.org/skip-the-wait>.

Spotlight on HEDIS Toolkits

TCHP develops Healthcare Effectiveness and Data Information Set (HEDIS) Toolkits that contain helpful information regarding the measure requirements, standards and codes to use that are acceptable for HEDIS reporting. The toolkits serve as a reference form that can be used to code the type of appointments made and ensure that all of the HEDIS standards are met, which help providers maintain high quality care and meet HEDIS measures. The toolkits now include tips for providers and helpful resources when applicable.

New and/or updated HEDIS Toolkits for 2025:

- [Adults' Access to Preventative/Ambulatory Health Services \(AAP\)](#)
- [Chlamydia Screening \(CHL\)](#)
- [Follow-Up After Emergency Department Visit for Mental Illness \(FUM\)](#)
- [Follow-Up After Emergency Department Visit for Substance Abuse \(FUA\)](#)
- [Follow-Up Care for Children Prescribed ADHD Medication \(ADD-E\)](#)
- [Immunizations for Adolescents – Combination 2 \(IMA-E-CO2\)](#)
- [Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents \(WCC\)](#)
- [Well-Child Visits in the First 30 Months of Life \(W30\); Child and Adolescent Well-Care Visits \(WCV\)](#)

To view all of our HEDIS Toolkits, view <https://www.texaschildrenshealthplan.org/providers/provider-resources/hedis-toolkit>.

HEDIS Data Reporting

HEDIS data reporting primarily uses Administrative Data, Hybrid Data, Survey Data, and now Electronic Clinical Data Systems (ECDS). ECDS is a growing trend in HEDIS reporting that allows for a more comprehensive view of patient care. This method uses direct data extraction from several sources such as, administrative claims, clinical registries, health information exchanges, immunization information systems, disease/case management systems and electronic health records. Measures that have transitioned to ECDS are indicated by an 'E' behind the measure acronym.

Improving Quality and Member Satisfaction

TCHP is committed to delivering high quality care that improves member health and the member experience. In accordance with the National Committee for Quality Assurance (NCQA), TCHP's Quality Improvement Team ensures that we meet key regulatory standards that achieves these goals. The QI team also drives TCHP's member obsession workgroup by focusing on continuous improvement in member satisfaction using assessment tools like the annual Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.

TCHP uses the results of the CAHPS survey to identify opportunities to improve member satisfaction with the quality of service they receive from us and from you. TCHP values the partnership we share with our Providers and appreciate your collaboration as we act on opportunities to improve based on performance on CAHPS measures.

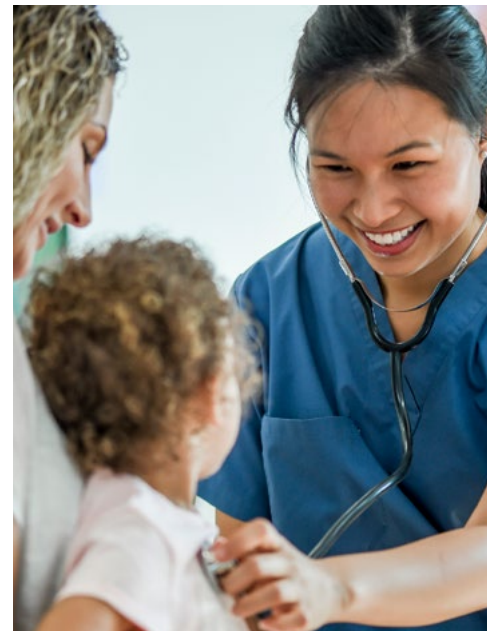
You have the power to advocate for our members and to optimize the member experience. As our trusted partners, you can help our members understand their care plans, coordinate follow-up care, and connect them to available resources, all of which have a positive impact on member satisfaction and CAHPS survey results. We also encourage you to educate, inform and empower our members to actively participate in their healthcare plans. Your engagement with our members in a holistic approach that promotes prevention and screening, supporting behavioral health and optimizing management of chronic disease is essential to improving both satisfaction and outcomes.

We would love to hear your suggestions and ideas as we move forward together. Below, we've outlined how we can partner with you, our valued providers, to make a difference in the lives of our members.

How can providers help improve CAHPS survey results?

1. Engage in data sharing and transparency
2. Promote preventive care
3. Proactively engage members in their healthcare plans
4. Advocate for Members
5. Provider input and suggestions
6. Partnering for success

We are excited to embark on this journey with you to improve member satisfaction and CAHPS survey outcomes. By working together and leveraging your insights and expertise, we can ensure that our members receive the highest level of care and service. For suggestions or questions please reach out to TCHP's Quality Improvement Team.



Pharmacy

TCHP follows the Texas Vendor Drug Program (VDP) formulary set by Texas Health and Human Services (HHSC). The formulary includes brand and generic drugs. Only drugs on this list are covered.

Some medicines may have extra rules:

- **Step Therapy (PDL PA):** For STAR and STAR Kids only. Providers must try a preferred drug before a non-preferred one.
- **Clinical Prior Authorization (Clinical PA):** Some drugs require review for medical necessity. Applies to STAR, STAR Kids, and CHIP.
- **Limits:** Certain drugs have quantity or day-supply limits.

Access the Texas Medicaid and CHIP formularies::

- The VDP website with a formulary search tool: <https://www.txvendordrug.com>
- The Navitus Medicaid website with a full list of covered products: <https://txstarchip.navitus.com/pages/formulary.aspx>
- The Epocrates mobile application: <https://www.epocrates.com/features>

Preferred Drug List (PDL)

STAR and STAR Kids members follow the PDL. The PDL formulary does not apply to CHIP members. This means CHIP members do not have to follow step therapy rules (trying and failing a preferred drug before getting a non-preferred one). Instead, CHIP members are only subject to clinical prior authorization (PA) rules.

- Non-preferred drugs require a PDL PA.
- A PDL PA means the patient must try and fail a preferred drug or have a medical reason why they cannot take it before the non-preferred medicine can be covered.

Clinical Prior Authorization (PA) Edits

A clinical PA confirms a drug is safe, effective, and medically necessary. The Texas Drug Utilization Review (DUR) Board and the VDP establish the rules for clinical PAs.

- Some medications require only a PDL PA, whereas others require only a clinical PA.
- In certain cases, both are needed. When that happens, the PDL PA is reviewed first, followed by the clinical PA.
- Clinical PA rules may change during the year. TCHP will notify providers of updates.

The most current criteria and PA forms can be found on the Navitus Medicaid website: <https://txstarchip.navitus.com/priorauthorizationforms>. Forms are listed by drug name, drug class, or associated drug list.

Additional updates can also be found on the TCHP provider webpage: <https://www.texaschildrenshealthplan.org/providers>.

Requesting Exceptions

Providers can request:

- **Quantity Limit Increase:** Explain diagnosis and why standard dose isn't enough.
- **High Dose Alert:** Justify doses >2.5 times recommended and how patient will be monitored.

Use the **Navitus Exception to Coverage Request form** on the Navitus Medicaid website.

Prior Authorization Denials: If a PA request is denied, providers can submit an appeal. A TCHP Medical Director reviews for medical necessity, which includes requests for non-formulary or non-preferred drugs.

Tip: PA appeals can also be used for any medication a doctor is prescribing for off-label use that does not meet standard PA requirements.

Texas Drug Utilization Review (DUR) Board

TCHP encourages providers and pharmacists to share their expert feedback on the Texas Medicaid and CHIP formulary, PDL, or clinical prior authorization rules. Providers can submit comments directly to the DUR Board.

Visit the Vendor Drug Program website:

<https://www.txvendordrug.com/advisory/drug-utilization-review-board>.

Pharmacy Access

TCHP partners with Navitus, a pharmacy benefits manager to administer pharmacy benefits to our members. This includes managing the pharmacy network. Members and providers can find participating pharmacies by visiting the TCHP website and selecting "[Find a Pharmacy](#)."

Providers may call Navitus at **1-866-333-2757** to inquire about or conduct telephonic prior authorizations. Providers can also ask about quantity limits or alternative choices on the PDL.

Prior Authorization for Health Services

To view TCHP's updated **Prior Authorizations Reference Information**, please visit <https://www.texaschildrenshealthplan.org/providers/prior-authorization-information>.

TCHP's Utilization Management (UM) team is here to assist providers with UM needs from 8 a.m. to 5 p.m. CST, Monday through Friday. During these hours, our staff is available to answer questions about the UM process and to receive information regarding UM transactions. If you reach out after hours, we will return your

call the next business day. Inbound messages may be left at any time. Providers may contact TCHP Utilization Management Services at 1-800-731-8527.

TCHP offers TDD.TTY services for deaf, hard of hearing, or speech impaired members and providers. For TDD assistance, please call 1-800-735-2989 or 7-1-1. Language line assistance is available to UM staff, if needed, in discussion with members or practitioners for any UM issue.

Prior Authorization Process

TCHP's provider portal, **Texas Children's® Link**, is the most efficient way for providers to submit authorization requests and review real-time status information. TCHP has intentionally invested in this tool to make it easier for providers. It provides many benefits such as:

- **Real-time Access to Authorization Status Information** – Authorization Status Update and Status History are **immediately available**, and determinations can be reviewed on the portal in real-time. **Users can also add, view and download associated letters directly from the portal in real-time.**
- **Faster Authorization Processing** – Prior Authorization requests submitted through the portal are processed quickly and easily by the UM team.
- **Easy Access for Providers and Staff** – In addition to providers, both clinical staff and non-clinical staff may submit and review authorization requests on the portal on behalf of a requesting provider.

TCHP encourages providers to use the Texas Children's® Link portal to submit authorization requests instead of fax. If you don't have a Texas Children's® Link account yet, request one today at: <https://www.texaschildrenshealthplan.org/providers/link-provider-portal>.

Non-clinical users can submit Prior Authorizations requests and/or claims. This functionality can be accessed by all non-clinical portal users.

When UM staff is unable to approve the requested service based on TCHP criteria, TCHP's Medical Director will review the authorization request along with any available clinical information, prior to issuance of any denial based on lack of medical necessity.

Before a issuing a denial regarding the medical necessity/appropriateness or the experimental/investigational nature of a healthcare service, TCHP provides the requesting provider a reasonable opportunity for a peer discussion with the Medical Director within one business day before notification of the decision. This allows Providers to discuss their patient's treatment plan and the clinical basis for their request prior to the adverse determination. It is important to note, a decision to deny a service authorization based on medical necessity can only be made by a physician.

If you have any questions or need additional information, please contact TCHP's Provider Relations team:

Phone: 832-828-1004

Toll free: 1-800-731-8527



We have Utilization Management Overview training available for providers, visit

<https://www.texaschildrenshealthplan.org/providers/provider-events>

Prior Authorization Fax Lines

- **Medical Inpatient Admissions and Discharge Notifications Fax Line** (Notification that a member discharged): 832-825-8462 or Toll-Free 844-663-7071
- **Medical Services Fax Line:** 832-825-8760 or Toll-Free 1-844-473-6860
- **Behavioral Health Services Fax Line:** 832-825-8767 or Toll-Free 1-844-291-7505
- **LTSS and Private Duty Nursing Fax Line:** 346-232-4757 or Toll-Free 1-844-248-1567
- **Discharge Authorizations for services needed immediately after discharge** (i.e. Home Health, DME)
Fax Line: Toll-Free 866-839-9879
Hours of Operation: 8 a.m. to 5 p.m., Monday–Friday

Information on Appeals

If a request for services is denied by TCHP, the ordering provider, rendering provider, and member will receive a letter indicating the reason why services are being denied. The member, member appointed representative, practitioner, or provider with member's written consent has the right to appeal a denial of services for a medical or pharmacy adverse determination (denial). Appeals must occur within 60 days of the denial letter date.

Members may represent themselves or be represented by the health care provider, a friend, a relative, legal counsel, or another spokesperson. TCHP will make a decision within 30 calendar days of receiving the request for a standard appeal. An expedited appeal may be placed when TCHP determines or the provider indicates to TCHP that routine appeal time frames could jeopardize the member's life, health, or ability to recover a function. TCHP will make a decision on an expedited appeal within 72 hours of receiving the request. Appeals for inpatient care made while a member is in the hospital will be resolved within 24 hours.

An expedited appeal for adverse benefit determinations in emergency situations can be initiated verbally or in writing. If a healthcare provider submits a statement with supporting documentation that the service is necessary for life-threatening treatment, the appeal will be expedited. Decisions will be notified within 72 hours, aligning with medical urgency. For CHIP members, telephonic notice occurs within one calendar day after receiving all required information, while STAR and STAR Kids members are notified within 72 hours. Written confirmation follows within three days, detailing the decision and its rationale, including references to applied guidelines. Members can request relevant documents at no charge, including the guidelines and supporting records. If a physician determines a standard appeal process is appropriate, the member will be notified by phone and in writing within two calendar days, including details about the next appeal level and any changes if the adverse decision is overturned.

All medical necessity appeals regarding services that have not been rendered or have already been delivered should be directed to the addresses below:

For STAR Kids Plan:

Texas Children's Health Plan
Attn: Appeals Department
P.O. Box 301011, WLS 8390
Houston, Texas 77230-1011
1-800-659-5764
or 832-828-1003
Fax: 832-825-8796

For CHIP Plan:

Texas Children's Health Plan
Attn: Appeals Department
P.O. Box 301011, WLS 8390
Houston, Texas 77230-1011
1-866-959-6555
or 832-828-1002
Fax: 832-825-8796

For STAR Plan:

Texas Children's Health Plan
Attn: Appeals Department
P.O. Box 301011, WLS 8390
Houston, Texas 77230-1011
1-866-959-2555
or 832-828-1001
Fax: 832-825-8796

Find out a Member's Rights and Responsibilities

It's important that members know and understand their rights and responsibilities. You can see the full text of them under the **Members Rights and Responsibilities** section in the member handbooks, which is mailed to each member when they join. To view the handbooks, visit:

- STAR: <https://www.texaschildrenshealthplan.org/starhandbook>
- CHIP: <https://www.texaschildrenshealthplan.org/chiphandbook>
- STAR Kids: <https://www.texaschildrenshealthplan.org/starkidshandbook>

The **Member's Rights and Responsibilities** documentation is available in printed form. Please send a request to your Provider Relations Liaison, or Account Lead, or to providerrelations@texaschildrens.org.

[texaschildrenshealthplan.org](https://www.texaschildrenshealthplan.org) or 1-866-959-6555 (CHIP) or 1-866-959-2555 (STAR) or 1-800-659-5764 (STAR Kids)

Supporting the Health and Well-Being of Women at TCHP

Extended Postpartum Coverage

Postpartum coverage now extends to 12 months after delivery or miscarriage (CHIP-P excluded). In addition, members who enrolled for reasons other than pregnancy also have access to a comprehensive range of preventive health tests and procedures.

Preventive Care & Well-Woman Visits

A well-woman visit is recommended annually for screening, evaluation, and counseling based on age and risk factors. This visit may include:

- Comprehensive health history
- Counseling on healthy lifestyle and risk reduction
- Appropriate immunizations

Learn more: <https://www.acog.org/topics/well-woman-health-care>

Early Detection & Family Planning

Regular screening is the best way to detect breast and cervical cancers early. Many members can access these services through their TCHP benefits.

Most TCHP members have family planning benefits. For those without coverage, services are available through the Healthy Texas Women Program: <https://www.healthytexaswomen.org/healthcare-programs/family-planning-program>.

Healthy Rewards

Please encourage our members to explore TCHP's Healthy Rewards, where they can gain access to prenatal and baby care classes, portable cribs, and so much more. Visit <https://www.texaschildrenshealthplan.org/benefits/healthy-rewards> to learn more.



Behavioral Health Case Management

TCHP offers behavioral health case management through a dedicated team of Registered Nurses and Social Workers trained in behavioral health, substance use disorder, and maternal mental health. To refer a member, complete the form located here: <https://www.texaschildrenshealthplan.org/providers/provider-resources/forms-and-manuals>.

Additional Resources

Explore our Perinatal Substance Use Disorder Toolkit, for training, screening materials, and referral resources: <https://www.texaschildrenshealthplan.org/providers/provider-resources/perinatal-substance-use-disorder-toolkit>

Nurse-Family Partnership

About the program

Nurse-Family Partnership is an evidence-based, community health program that serves first-time mothers and their families dealing with economic inequity. Texas Children's Health Plan (TCHP) offers this program to eligible members. The program pairs Registered Nurses with low-income, first-time mothers to improve prenatal care and provide support, education, and counseling on health, parenting and developmental issues and life skills.

How it works

- Nurses begin visiting with the members enrolled during their pregnancy. The visits occur every one to two weeks at their family's home, and **continue throughout her pregnancy until her child is two years old.**
- Nurses offer education, guidance, and counseling on topics such as healthy pregnancy practices, baby care, safe sleep techniques, and more.

Nurse-Family Partnership has **no cost** for TCHP's eligible members. The program aims to help members:

- Have a healthy pregnancy and a healthy baby.
- Gain knowledge on infant nutrition, development, and safe-sleep techniques.
- Access referrals for healthcare, childcare, job training, and other support services available in their community.
- Continue their education and develop job skills for a better future.



Eligibility for enrollment

Any Texas Children's Health Plan member who:

- Is pregnant with her first child and is 28 weeks pregnant or less.
- Meets the income requirements.
- Out of the three Service Delivery Areas (SDAs) that TCHP covers, Harris, Jefferson, and Northeast, Nurse-Family Partnership is available in the following cities: Houston and area, Port Arthur, Tyler and Longview.

If you have a pregnant patient who may benefit from the program, please refer them to Nurse-Family Partnership. This service is offered at no cost to eligible TCHP members, ensuring they receive the support they need to have a healthy pregnancy and begin their journey into parenthood with confidence.

For more information or to refer a patient, please [click here](#) or contact nfpreferral@texaschildrens.org or call **832-828-1274**.

Healthy Texas Women (HTW) Plus Program features enhanced Postpartum Care Services

Benefits available through HTW Plus focus on treating health conditions that contribute to maternal morbidity and mortality, including the following:

- Postpartum depression and other mental health conditions (services include individual, family and group psychotherapy services; and peer specialist services).
- Cardiovascular and coronary conditions (services include imaging studies; blood pressure monitoring; and anticoagulant, antiplatelet, and antihypertensive medications).
- Substance use disorders, including drug, alcohol and tobacco misuse (services include screenings, brief interventions, treatment referrals, outpatient substance use counseling, smoking cessation services, medication-assisted treatment, and peer specialist services).

To qualify for HTW Plus benefits, HTW clients must have been pregnant within the last 12 months.

To read more about the qualifications, visit: <https://www.healthytexaswomen.org/healthcare-programs/healthy-texas-women/htw-who-can-apply>.

Resource: <https://www.healthytexaswomen.org/healthcare-programs/healthy-texas-women/htw-benefits>

Health And Human Services' Healthy Texas Women (HTW) Program

The Healthy Texas Women Program offers women's health and family planning services to eligible, low-income women as a transition from the Medicaid for Pregnant Women program coverage. To apply online go to YourTexasBenefits.com to submit an application online. If you have questions about a member's enrollment visit <https://www.healthytexaswomen.org/healthcare-programs/healthy-texas-women/htw-benefits>.

The services help women plan their families, whether they want to achieve, postpone or prevent pregnancy. These services may also have a positive effect on future pregnancy planning and general health. Healthy Texas Women provides a wide variety of women's health and core family planning services, including:

- | | |
|---|--|
| • Pregnancy testing | • HIV screening |
| • Pelvic examinations | • Long-acting reversible contraceptives |
| • Sexually transmitted infection services | • Oral contraceptive pills |
| • Breast and cervical cancer screenings | • Permanent sterilization |
| • Clinical breast examination | • Other contraceptive methods such as condoms, diaphragm, vaginal spermicide, and injections |
| • Mammograms | • Screening and treatment for postpartum depression |
| • Screening and treatment for cholesterol, diabetes and high blood pressure | |

Resources: HTW Benefits: <https://www.healthytexaswomen.org/healthcare-programs/healthy-texas-women/htw-benefits>

HTW Eligibility Information: <https://www.healthytexaswomen.org/healthcare-programs/healthy-texas-women/htw-who-can-apply>

HTW Provider Resources: <https://www.healthytexaswomen.org/provider-resources>

The Texas Long-Acting Reversible Contraception Toolkit:

<https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/health/women/texas-larc-toolkit.pdf>

Cultural Competency

What is Cultural Competency in Health Care?

Cultural competency is the ability of health care systems, providers, and staff to deliver care that is respectful of and responsive to people's diverse cultures, languages, values, and beliefs. It means affirming and recognizing the worth of every individual, regardless of cultural background, race, ethnicity, language, or religion.

Why Cultural Competency Matters

- Helps providers and members communicate effectively.
- Builds trust and improves member satisfaction.
- Supports better health outcomes for individuals and families.
- Reduces health disparities and promotes health equity.
- Ensures care is delivered in a respectful, unbiased way that meets cultural and linguistic needs.

How We Support Providers and Staff

All TCHP staff and Service Coordinators receive training in cultural competency during onboarding and annually. Providers receive education and resources to support culturally competent care and communication. We maintain a Service Coordination cultural competency subject matter expert (SME) to support compliance and best practices.

Healthy Rewards Program

At TCHP, we go beyond our members' covered medical needs by offering extra benefits and incentives to help your patients achieve and maintain their health goals.



NEW: Texas Children's Health Plan now using MyChart for Reward Requests

TCHP has made it easier than ever for members to request rewards through the TCHP MyChart platform. Members new to MyChart are required to create an account and then activate their TCHP information. For more information including a helpful how to video, <https://www.texaschildrenshealthplan.org/mychart>

Healthy Pregnancy

- Basic baby care and birth classes (eclases or shipped printed materials)
- Blood pressure monitor (CHIP-Perinate only)– [can be requested by the provider](#)
- Portable crib/playpen
- Prenatal and postpartum visit completion reward
- Flu prevention during pregnancy

Health and Wellness

- ADHD management reward (STAR and STAR Kids aged 6-12)
- Asthma education reward
- Cervical cancer screening reward (STAR members aged 21+)

Health and Wellness (con't)

- Diabetes management rewards
- Health education special events
- Reward for new members who complete the Health Risk Assessment
- Reward for childhood flu prevention (members aged 0-2)
- Reward for chlamydia screening (members aged 16-24)
- Eyewear support
- Mental health follow-up reward
- Well-child checkup completion reward (members aged 0-30mo)
- Young adult wellness reward (members aged 16-21)

Healthy Play and Exercise

- Extracurricular activity fee assistance (members aged 5-21)
- Fitness center membership fee assistance (STAR members aged 21+)
- Sports and school physicals (Harris County only)
- Sports clinics
- **Extra Help for Families**
- 24-hour nurse Help Line
- Dental services (STAR members only)
- Transportation services

Visit <https://www.texaschildrenshealthplan.org/benefits/healthy-rewards> for more details.

* Restrictions and limitations may apply and may vary by plan, including but not limited to age, gender and covered benefits by program. Extra benefits valid during the eligible state fiscal year (September 1, 2025 to August 31, 2026). Must be an active Texas Children's Health Plan member at time of verification to receive extra benefit. Unless otherwise stated, reward must be redeemed in the current eligible year. Purchase of alcohol, tobacco, illegal drugs, or firearms is prohibited with the reward cards. Unless otherwise stated, rewards are limited to one member per eligible year. TCHP is not responsible for lost or stolen rewards. Depending on the benefit, the reward can be requested up to 60 days after the end of the eligible year. Allow up to 90 days for delivery of the reward.

Complex Case and Disease Management Program

TCHP offers comprehensive case and disease management services to support providers in delivering high-quality care to members with:

- Chronic and complex conditions
- Mental Health condition with a chronic medical condition
- Pregnancy
- Asthma
- Diabetes
- Sickle Cell Disease

How it works

- Service coordinators enroll members into appropriate programs based on screeners/assessments, provider referrals, or member self-referrals.
- A personalized service plan is developed and shared with the member and, with permission, the provider.
- Providers can access service plans via the provider portal, Texas Children's® Link, or request a copy directly.
- Phone coaching and follow-up calls are conducted based on the member's level of need.

Provider Collaboration

- Service coordinators work closely with Primary Care Providers (PCPs and Specialists) to share relevant health information.
- Providers are encouraged to include service plans in the patient's medical record.
- The goal is to improve adherence to treatment plans and support better health outcomes.

Need More Information or Want to Refer a Member?

Care Management Department:
832-828-1430

Referral Forms: Available at
<https://www.texaschildrenshealthplan.org/providers/provider-resources/forms-and-manuals>

or via the Texas Children's® Link portal under TCHP Provider Resources > Physician Forms

Email Completed Forms to:
CaseManagementPhysicianReferral@texaschildrens.org

Fax Completed Forms to: 832-825-8745



Quality Care Coordination

Care coordination addresses potential gaps in meeting our members' interrelated medical, social, behavioral, and educational needs to achieve the best health and wellness outcomes.

The goal is to ensure that individualized needs and preferences are recognized, and that high quality and efficient care is delivered for best outcomes. Case managers, social service professionals, and trained health care workers all play a key role in managing care of the individual by providing guidance through the health care system either telephonically, virtually or in a face-to-face visit with the member.

Individuals who have multiple ongoing needs that cannot be met by a single practitioner or by a single clinical organization benefit from care coordination the most.

Care coordination has three primary focus areas:

1. Support of self-management through education, advocacy (specialist access, school nurse), shared decision-making, and flexibility with individuals and families by connecting members with prevention and wellness services.
2. Coordination of assessment data and health information.
3. Promoting connections to care delivery and transition support from pediatrics into adult care. Comprehensive care coordination develops a plan of care including clinical (medical and behavioral) and social service needs and wellness goals.

Comprehensive care coordination:

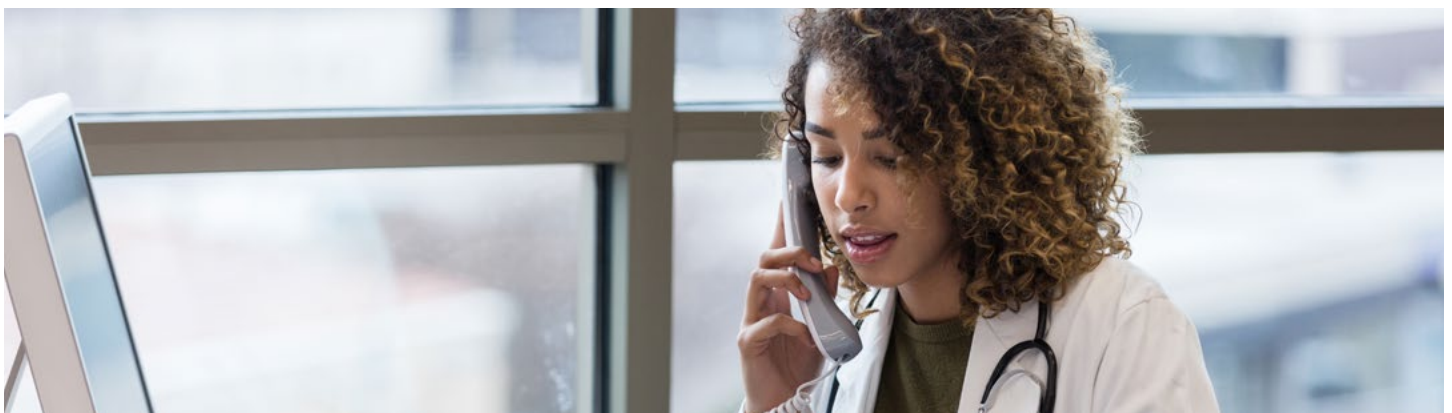
1. Establishes a connection to supports and services at home, school, and community, and;
2. Provides access to family support services designed to enhance a family's ability to navigate systems and advocate effectively.

Care coordination includes the process of developing an informed and motivated member/family, in partnership with a proactive practice team. Techniques are based on Wagner's Chronic Care Model (informed activated patient with prepared proactive practice team).

Referral Forms: Available at <https://www.texaschildrenshealthplan.org/providers/provider-resources/forms-and-manuals> or via the Texas Children's® Link portal under TCHP Provider Resources > Physician Forms

Email Completed Forms to: CaseManagementPhysicianReferral@texaschildrens.org

Fax Completed Forms to: 832-825-8745



Provider Enrollment

Provider Enrollment and Management System (PEMS) Information

Providers must update their enrollment and demographic information with Texas Medicaid Healthcare Partnership's (TMHP) PEMS. PEMS is the required TMHP program which is the single source of truth for provider enrollment, reenrollment, revalidation, change of ownership, and maintenance requests (maintaining and updating provider enrollment record information) for Texas Medicaid.

- PEMS is the official source of truth for all provider information.
- TCHP will contract, credential and pay only those providers who are properly enrolled with TMHP and whose information is received in the official PEMS file from TMHP.
- It is essential for every provider to be enrolled at each location where they see patients. This will help ensure an accurate online directory with correct search results.

TCHP would like to remind providers to update their **Clinical Laboratory Improvement Amendment (CLIA) certifications** during their provider enrollment revalidation period in PEMS. Guidance is available at www.tmhp.com/topics/provider-enrollment/pems/licenses.

For more information and resources, visit <https://www.texaschildrenshealthplan.org/providers/provider-resources/provider-enrollment-requirements>

Cobblestone Information

In addition to updating TMHP, providers must notify TCHP in writing of any additions, terminations, or changes to provider information. These updates must be submitted within seven days of the change using Cobblestone Gateway, TCHP's contract management system.

The Cobblestone Gateway, along with the template to submit roster changes, can be found at <https://www.texaschildrenshealthplan.org/providers/becoming-a-participating-provider>

Understanding Fraud, Waste and Abuse

The Office of Inspector General (OIG) is continuously monitoring the populations served by the Health and Human Services Program, for instances of fraud, waste and abuse. In order to provide a better understanding of the OIG's efforts in detecting, deterring and correcting incidents of fraud, waste and abuse, please refer to their website: <https://oig.hhs.texas.gov/>. Incidences of fraud, waste and abuse can also be reported through the OIG's website.

If there is a particular topic you would like to have addressed, please contact the OIG at <https://oig.hhs.texas.gov/engage-us>.

To report potential fraud directly to Texas Children's Health Plan:

**The Texas Children's Health Plan
Fraud Hotline:** 866-828-4924 or visit <https://tchpintegrity.com/>
Fax number: 832-825-8722
Email: TCHPSIU@texaschildrens.org

Mail:

**Texas Children's Health Plan
Fraud and Abuse Investigations**
PO Box 301011, WLS 8360
Houston, TX 77230-1011

Provider Portal: Texas Children's® Link Reminders



To find the Texas Children's® Link User Guide, navigate to the **Texas Children's Health Plan Portal** Resources section in the portal.

Texas Children's® Link is a single, robust and powerful system that consolidates communications between TCHP staff, members and providers.

Our provider portal, Texas Children's® Link, is available at:

<https://epiccarelink.texaschildrens.org/>

As Texas Children's® Link users, providers and staff can:

Verify Eligibility and Benefits

- View Texas Children's® Health Plan member eligibility and benefits

Manage Claims

- Submit, review, and appeal batched and single claims
- Claims appeal report
- NEW: Claim edit validation and corrected/replacement claim functionality is now available. To learn more, visit <https://www.texaschildrenshealthplan.org/news/provider-alert/new-real-time-feedback-claim-submissions-0>

Credentialing

Credentialing with TCHP begins after the provider or group has started the contracting process with TCHP. Visit this webpage for more information, <https://www.texaschildrenshealthplan.org/providers/becoming-a-participating-provider>.

During the credentialing process, TCHP follows the HHSC Uniform Managed Care Contract (UMCC) requirement and utilizes the Texas Association of Health Plans' (TAHP) contracted Credentialing Verification Organization (CVO), Verisys as a part of credentialing and re-credentialing. The CVO is responsible for receiving completed applications, attestations, and primary source verification document.

Manage Prior Authorization

- Submit prior authorization requests and review authorization decision status
- Authorization criteria and utilization management guidelines

Improve Quality of Care

- For Primary Care Physicians and OB/GYNs, access to Healthcare Effectiveness Data and Information Set (HEDIS®) data through Inovalon Population Management software
- Access up-to-date Clinical Practice Guidelines
- Access patient clinical activity provided at Texas Children's
- Tools to manage your population
- Access reports, including member rosters with improved descriptions and instructions in the portal training guide, and the Asthma High Risk Reports



Scan the QR code to login.

Verisys shall collect applications and/or documentation from the practitioner/provider via the Council for Affordable Quality Healthcare (CAQH) ProView™ as is necessary to perform primary source verifications. Verisys will also accept applications, which should be consistent with the Texas Standardized Credentialing Application (TSCA). Practitioner applications received on forms other than the described above will be rejected by Verisys and the provider will be redirected to apply with the TSCA application forms. During the credentialing process TCHP verifies the TSCA is complete.

To submit your credentialing application via the CAQH ProView™ Web-based solution, please visit: <https://proview.caqh.org/>. If you are a first-time user or to learn more about CAQH and the ProView™ program, visit <https://proview.caqh.org/>, where you can view an online demonstration of the application process. Alternatively, you may call the CAQH Help Desk at 1-888-599-1771.

We are pleased to participate in an innovative credentialing application tool that streamlines the credentialing process for health care professionals. The CAQH's ProView™ is a web-based solution that enables healthcare providers to complete their credentialing application online. In addition, health care providers can control the data stored in the database, easily update their data, and make the data electronically available to TCHP and any other MCO.

Most commonly asked questions are:

What is CAQH ProView?

CAQH ProView™ is more than a credentialing database and is available at no cost to individual practitioners. CAQH ProView eliminated duplicative paperwork with organizations that require your professional and practice information for claims administration, credentialing, directory services, and more.

What is the CAQH Provider ID for Texas Children's Health Plan?

TCHP's Individual practitioner CAQH ID is 1340.

How long does the credentialing process take?

On average, once the application is complete requests are processed within 90 days.

What are my rights as a Practitioner?

When the credentialing process is initiated, the practitioner is entitled to:

1. Review information submitted to support the credentialing application.
2. Correct erroneous information.
3. Receive the status of their credentialing or re-credentialing upon request.

To request, provide or correct any information in your credentialing file, send an email to TCHPCredentialing@texaschildrens.org. If a practitioner inquiries about the status of their credentialing application, our credentialing staff will review the practitioner's Texas Standard Credentialing Application and the status of the credentialing file, including pending and/or completed primary source verifications with Verisys. Information that is allowed to be shared with practitioners include, but not limited to, information the provider submitted during the credentialing application process and discrepancies with state enrollment that may delay the process. TCHP is not allowed to share any information protected by applicable peer review law (i.e. NPDB queries). Once our team determines the completeness and anticipation of credentialing committee review timeframe, you will be notified of your credentialing status via email.

Verisys/Apture, a credentials verification organization, will retrieve your information and perform primary source verification of your credentials. You may receive requests from Verisys/Apture for additional information.

If you are unable to access the online options, you may return your completed paper application with supporting documents to Verisys/Apture via the following methods:

- Upload application to <https://outreach.aperturecvo.com>. Use Access Code: aperture
- Fax with letter, which includes the TCID to **866-293-0421**
- Mail to: **Aperture Health, PO Box 221049 Louisville, KY 40252**
- Facilities Only – Secure email to TAHPApps@verisys.com include the letter with the TCID code

If you have any questions regarding the primary source verification process, you may contact Verisys/Apture's Customer Service at 1-855-743-6161 and select option 3.

What can cause a delay in the credentialing process?

When an application is not complete, this will cause a delay in the credentialing process. If you intend to become a provider, please be sure to:

- Review your application in CAQH ProView™
- Check for expiring documents.
- Sign and date the Attestation.
- Update or replace material as needed.

Can I become credentialed before I have a contract with Texas Children's Health Plan?

No. You must obtain a contract before being credentialed.

When can I start delivering care to TCHP members?

Providers should not start providing care to TCHP members until they receive written notification that the Credentialing process is complete.

If I do not have a complete CAQH application, will my credentialing start?

No. Primary source verification and/or data collection will not start until a complete application is completed by the provider via Verisys/Aperture.

The following are a list of common mistakes made on the CAQH application:

- Name changes not updated.
- Expired attestation.
- Provider NPI number is missing.
- Provider NPI is not enrolled with PEMS.
- Gaps in the last 5 years of work history: an explanation of gaps over five months not provided.
- Incomplete group practice and service location(s) on application.

- Expired Malpractice Liability Coverage policy.
- If the liability is under the group's insurance policy (attach a letterhead or roster stating that the provider is covered under the group's insurance policy).
- Required documents must be successfully uploaded and approved by CAQH before the CAQH ProView™ profile is considered complete and accessible to TCHP. Documents typically take 2-5 days for CAQH's approval.
- Complete application status is indicated as Initial Profile Complete and Re-Attestation. Any other status indicates the application is incomplete.
- View the Provider Documentation page for any required documents missing.

What is the process for facility providers applying to the TCHP network?

Once your contracting process is complete, TCHP will submit your information to Verisys/Aperture to complete primary source verification of your credentials. Verisys/Aperture will contact you to complete the facility application and request the documents required to complete the credentialing process. You may return your completed paper application with supporting documents to Verisys/Aperture via the following methods:

- **Upload application** to <https://outreach.aperturecvo.com>. Use Access Code: aperture
- **Fax with letter**, which includes the TCID to 866-293-0421
- **Mail to:** Aperture Health, PO Box 221049
Louisville, KY 40252
- **Facilities Only – Secure email** to TAHPApps@verisys.com include the letter with the TCID code.

Re-Credentialing Information:

Verisys will notify providers due for re-credentialing via letter or email the timeframe in which the provider must submit its re-credentialing application for processing. Notification letters will be sent to providers six (6) months prior to the end of the provider's thirty-six (36) month re-credentialing cycle.

When a practitioner's prepared credentialing file is incomplete or missing information that the practitioner is required to submit, the Credentialing staff will, under the direction of the CMO, Designated Medical Director, or Associate Medical Director, notify the practitioner in writing via letter regarding the incomplete application. The notice will also inform the practitioner of his/her right to correct, explain or submit missing information to the Credentialing Manager within five business days of receipt of the notice.

The Credentialing Manager notifies the practitioner via letter or email when the correction has been received.



More Information and Feedback

For assistance, please reach out to your Provider Relations Liaison (PRL). If you're not sure who your PRL is, visit the Meet our Team page, <https://www.texaschildrenshealthplan.org/for-providers/meet-our-team>, or contact us at providerrelations@texaschildrens.org.

We invite you to share your feedback or suggestions for future newsletter and communications. Please reach out to us at providerrelations@texaschildrens.org to share your ideas.

